

**RFP 08-331**  
**Provider Compensation Subsystem (PCS)**  
**Amendment #4**  
**Bidders Questions and DSHS Answers**

As stated in the RFP document, DSHS will be "... bound only to written answers to questions. Any oral responses given at the Pre-Proposal Conference shall be considered unofficial and are not binding on DSHS..."

The following are the DSHS answers to Bidders questions 47 through 59. This release contains questions asked at both the bidders conference and submitted in writing. DSHS is responding to a total of 130 bidder questions. Additional answers to the remaining bidders questions will be posted when they are finalized by DSHS.

Question Number	Question	DSHS Answer
47	If the payments are not cashed by the client, will the PCS vendor get that information, and what is the reconciliation process?	<p>Yes, this data is expected to be sent to PCS. As an example, see functional requirement F.5.1.13 (emphasis added):</p> <p>“STATUTE OF LIMITATIONS - The system shall cancel the payment record and make appropriate adjustments against any payments identified by another system as being subject to Statute of Limitations. Currently, these are payments which are not cashed after 180 days from date of issue.”</p>
48	What types of providers will be collected from, can you explain the difference between the IP’s and Facility Providers.	<p>As defined in Reference G, an IP is “A provider contracted by the department to provide personal care services to clients in their own homes.” IPs typically receive</p> <p>compensation subject, at least in part, to W-2 (bidders should recognize there are some nonreportable earnings). The invoice lists all clients and services to those clients for which this particular IP is authorized.</p> <p>A Provider Facility is a vendor providing services to DSHS and being compensated under 1099. Agency invoices typically list many more clients, than IPs. Time entry and the format of the remittance advice will also differ.</p>
49	There are references in the RFP to pay rates and pay rate tables. Will someone from PCS maintain the payroll tables or are you expecting DSHS to maintain those tables?	<p>The PCS vendor shall maintain at least some rate tables necessary to accurately process pay. The specific rate tables to be maintained within PCS have not been identified. The bidder shall assume that tables necessary to maintain rates adjusted during the payroll process – shift differentials, seniority (Cumulative Career Hours), and career and wage ladder rates – are likely to reside within PCS.</p>

Question Number	Question	DSHS Answer
50	Base pay rates will come from ProviderOne. Will PCS then need to do apply additional rate changes, to process pay?	The vendor shall rely upon receipt of base rates from ProviderOne. However, business rules require that PCS administer defined differentials and other rate modifiers. Among these are modifiers which rely upon accruals established in PCS. As an example, PCS is responsible for maintaining Cumulative Career Hours (CCH). CCH is used to modify the rates paid for certain services, as defined by Collective Bargaining Agreement. Refer to the CBA for details regarding rates and modifiers.
51	<p>Would the PCS vendor use DSHS's EIN?</p> <p>Going back to the EIN clarification: You mentioned in spirit the vendor would be an agent of DSHS? Does that mean PCS would use DSHS's EIN number for the agent?</p>	The PCS vendor will use an EIN identified by DSHS and not an EIN acquired by the vendor.
52	Will PCS vendor when making tax payment reporting, (workers comp, etc) will the PCS vendor file with the client EIN or the DSHS EIN.	The DSHS EIN will be used. Today, the Social Service Payment System (SSPS) uses the DSHS EIN for tax payments. An exception is payments to Labor & Industries (workers compensation), which uses a special UBI established for providers claiming union-covered services.
53	<p>Section F.2.4.6 Page 127 The system shall include union dues deducted as reportable income on annual W-2 and 1099 reporting.</p> <p>Are all Providers required to be employees and members of at least one union? If not, will non-employee Providers be administered as they are today and be issued a 1099?</p>	<p>No, providers are not required to be members of a union. A provider authorized for services which are non-union-covered services, for example, is not a member of a union. Only providers authorized for services covered under a CBA are recognized as members of a union.</p> <p>As no Social Service provider is an employee of the state, state employment cannot be used as criteria to determine W-2 or 1099 tax treatment.</p>
54	Requirement F.2.4.18 The system must accommodate Provider voluntary deductions as per requirement F.2.4.18. Union and healthcare deduction enrollment was specifically covered in other requirements, but how does a Provider enroll for voluntary deductions?	Enrollment in the present voluntary deductions is with the union. PCS receives a data file, from the union, which is used to establish and maintain the deduction in the system.

Question Number	Question	DSHS Answer
55	It appears that some Providers may be part of different bargaining units – how are their benefits determined if they are part of more than one bargaining unit?	<p>The association to unions is through the service authorized, and not through the provider performing the service. As an example, a provider may indeed perform, even in the same pay period, a service covered under one CBA, another service covered by another CBA, and a third service covered under no CBA. Services can be identified (and PCS will have to track hours claimed (paid)) as being (1) either union-covered or not union-covered and (2) if union-covered, which union. It will be known to PCS which services are union-covered and, if covered, which CBA is applicable.</p> <p>Eligibility and administration of benefits are therefore based upon services only covered under the CBA which prescribes the benefit.</p>
56	Is it possible that providers are covered under multiple CBA's	<p>Yes. The association to unions is through the service authorized, and not through the provider performing the service. As an example, a provider may indeed perform, even in the same pay period, a service covered under one CBA, another service covered by another CBA, and a third service covered under no CBA. Services can be identified (and PCS will have to track hours claimed (paid)) as being (1) either union-covered or not union-covered and (2) if union-covered, which union. It will be known to PCS which services are union-covered and, if covered, which CBA is applicable.</p>

Question Number	Question	DSHS Answer
57	Will the ASP vendor be responsible for determining the benefit eligibility for the union members? Is it true that their eligibility can change from month to month?	<p>It depends on the benefit. In the case of vacation accruals, yes, PCS is responsible for correctly accruing vacation time against union-covered services claimed and PCS will administer vacation accrual banks in order to conform with current CBA.</p> <p>As an example, bidders may refer to Article 12 – Vacation Leave, in the CBA with SEIU 775NW.</p> <p>With respect to determination of eligibility for health insurance benefits, responsibility is coordinated between PCS and the Taft-Hartley Administrator or the designated servicing agent (Benefits Solutions, Inc. (“BSI”), as an example). PCS identifies likely eligible providers, based upon the number of union-covered services claimed, but it is the responsibility of BSI to enroll the provider and to notify PCS, by means of an interface, to commence deductions and calculation of the State’s contribution to health care benefits.</p> <p>It is true that a provider’s eligibility for health benefits may lapse in any month. The rules are specified in the applicable CBA. For example, bidders may refer to the CBA with SEIU 775NW, Article 10 – Comprehensive Health Care Benefits.</p>
58	How many service types are performed by providers included in PCS?	Conversion of SSPS service codes, to those anticipated to be used by ProviderOne, has not been completed. Base pay rates, union identification, provider relationship to client, account coding, and other details currently contained within SSPS service codes will be resolved by ProviderOne. Data required to accurately calculate pay is anticipated to be included in the interface from ProviderOne to PCS.
59	Section F.8.2.7 Page 151 The RFP states: The system shall identify expedited payments on appropriate screens and reports. Please define “expedited payment.” Is this a payment that is paid outside of the regularly scheduled pay cycle?	Yes. Once it is received by PCS, an expedited authorization would require a payment calculation to be completed, and a payment transaction to be produced, by the next business day.